



SITZ MARKER STUDY

Patient's Name: _____

DOB: _____

**Diagnostic Imaging Department
222 Medical Circle
Morehead, KY 40351
Office: 606-783-6761
Fax: 606-783-6935**

Patients:
These are the instructions for your
scheduled procedure in our
Diagnostic Imaging Department.

Scheduling

Your examination has been scheduled for:

Date: _____ **Time:** _____ **A.M./P.M.**

The above time has been reserved for you. Please arrive 15 minutes before the appointed time so you can register. When you arrive to register, please follow the guidelines below to know where to sign in:

Admitting/Registration - 6:30 a.m. to 11:00 p.m.
Emergency Room Registration - 11:00 p.m. to 6:30 a.m.

Purpose

This procedure is performed in order to evaluate the length of time required for your food to pass from your stomach to the lower bowel.

Preparation - Sunday

On the day before the test, take the Sitz mark capsule by mouth with water. Do not use any laxative, enemas, or suppositories for 5 days.

Procedure - Monday

Register at the Outpatient registration desk (on Monday only) at St. Claire Regional Medical Center, and then proceed to the Diagnostic Imaging Department. You will have an image acquired of your abdomen.

You will return on Wednesday and Friday for the same procedure (you will also need to register at the Outpatient registration desk on these days.)

Results

The radiologist will review your exam and a report will be sent to your physician. Your physician will then discuss your results with you. The technologist will be unable to give you any information or interpretation about the results of your exam.

If you have questions concerning your upcoming procedure, please call the Diagnostic Imaging Department at 606-783-6761.